



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 www.uspto.gov

BIBDATASHEET

CONFIRMATION NO. 4823

Bib Data Sheet

SERIAL NUMBER 10/757,059	FILING OR 371(c) DATE 01/14/2004 RULE	CLASS 514	GROUP ART UNIT 1621	ATTORNEY DOCKET NO. 0701.026F
------------------------------------	---	---------------------	-------------------------------	---

APPLICANTS

Nancy M. Gray, Marlborough, MA

** CONTINUING DATA *****

This application is a CON of 10/256,518 09/26/2002 ABN
 which is a CON of 09/783,683 02/14/2001 ABN
 which is a CON of 09/268,388 03/15/1999 ABN
 which is a CON of 08/772,944 12/23/1996 PAT 5,888,535 *
 which is a CON of 08/416,442 04/03/1995 ABN
 which is a CON of 08/054,318 04/27/1993 ABN
 (*)Data provided by applicant is not consistent with PTO records.

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 04/15/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MA	SHEETS DRAWING 0	TOTAL CLAIMS 9	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

ADDRESS

2264

TITLE

METHOD FOR TREATING GASTRIC DISORDERS USING OPTICALLY PURE (-) PANTOPRAZOLE

FILING FEE RECEIVED 770	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees (Filing)
		<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
		<input type="checkbox"/> 1.18 Fees (Issue)
		<input type="checkbox"/> Other _____
		<input type="checkbox"/> Credit